

## CLASS V INJECTION WELL PERMIT APPLICATION

TYPE ONLY. This application may be completed and submitted by the contractor.

1. APPLICATION TO (Check One)	
<input type="checkbox"/> DRILL & COMPLETE NEW INJECTION WELL	<input type="checkbox"/> PERMIT EXISTING INJECTION WELL
<input type="checkbox"/> CONVERT EXISTING WATER WELL TO INJECTION	<input type="checkbox"/> OTHER (SPECIFY):

2. IDENTIFY WELL TYPE: (e.g. Ground Water Remediation, Heat Pump, Process Waste, etc.):
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3. INJECTION WELL FOR (Check One)	
<input type="checkbox"/> PRIVATE RESIDENCE	<input type="checkbox"/> COMMERCIAL BUSINESS
<input type="checkbox"/> COMMERCIAL RESIDENCES (APARTMENT BUILDING, ETC.)	<input type="checkbox"/> OTHER (SPECIFY):

4. OWNER'S NAME:
MAILING ADDRESS:
CITY, STATE, ZIP CODE:
TELEPHONE NO. WITH AREA CODE:

5. FACILITY NAME:
STREET ADDRESS:
CITY, STATE, ZIP CODE:
TELEPHONE NO. WITH AREA CODE:

6. Contractor or Agent authorized to act on behalf of the owner during the processing of the Application. If Water Well Contractor, give license number.
NAME:
MAILING ADDRESS:
CITY, STATE, ZIP:
TELEPHONE NO. WITH AREA CODE:
WATER WELL CONTRACTOR'S LICENSE NO: WWC-

7. WELL INFORMATION: If permitting more than one well, provide WELL INFORMATION for each well on a separate sheet.

WELL NAME AND NUMBER:

SERIAL NUMBER: (CONVERSION OR REPERMIT ONLY)

WELL DEPTH:

SECTION-TOWNSHIP-RANGE:

PARISH:

LOUISIANA LAMBERT (X-Y) COORDINATES:

LATITUDE:

LAMBERT-X:

LONGITUDE:

LAMBERT-Y:

8. INJECTION WELL OWNERSHIP: (Check One)

☐ PRIVATE ☐ FEDERAL ☐ STATE ☐ MUNICIPAL ☐ OTHER - SPECIFY:

9. PROPOSED WELL COMPLETION DATE OR DATE WELL COMPLETED:

PROPOSED DATE INJECTION TO BEGIN OR DATE INJECTION BEGAN:

10. PROPOSED INJECTION RATE (GAL/MIN):

NORMAL;

MAXIMUM

NUMBER OF HOURS/DAY INJECTING:

SUMMER;

WINTER

NUMBER OF DAYS/YEAR INJECTION:

11. PROPOSED DAILY INJECTION VOLUME (GALLONS): \_\_\_\_\_ AVERAGE

\_\_\_\_\_  
MAXIMUM

12. INJECTION WELL OPERATING LINE PRESSURE:

PSI

DISCHARGE PRESSURE INTO THE INJECTION WELL:

PSI

13. **FOR PROCESS WASTE INJECTION WELLS**, DESCRIBE OF THE NATURE OF THE BUSINESS ASSOCIATED WITH THE FACILITY AND LIST ACTIVITIES WHICH REQUIRE THE POSSESSION OF A CLASS V PERMIT.

14. DESCRIBE SOURCE OF INJECTED EFFLUENT PRIOR TO ENTERING THE INJECTION WELL SYSTEM (IF WATER WELL, GIVE SCREENED INTERVAL).

15. DESCRIBE IN DETAIL THE SAFEGUARDS TO BE USED TO PREVENT CONTAMINANTS FROM ENTERING THE SYSTEM AND THE INJECTION WELL. INCLUDE DISCUSSION ON EFFLUENT PRE-TREATMENT.

16. IS THE INJECTION WELL LOCATED ON INDIAN LANDS OR OTHER LANDS UNDER THE JURISDICTION OR PROTECTION OF THE FEDERAL GOVERNMENT:

☐ YES ☐ NO

17. IS THE INJECTION WELL LOCATED ON STATE WATER BOTOMS OR OTHER LANDS OWNED BY OR UNDER THE JURISDICTION OR PROTECTION OF THE STATE OF LOUISIANA:

☐ YES ☐ NO

18. **FOR PROCESS WASTE WELLS ONLY**, LIST AND DESCRIBE IN ORDER OF DECREASING SIGNIFICANCE UP TO FOUR STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODES WHICH BEST REFLECT THE PRINCIPAL PRODUCTS OR SERVICES PROVIDED BY THE FACILITY:

SIC CODE	PROCESS DESCRIPTION
1.	
2.	
3.	
4.	

NOTE: Reference All Depths To Ground Level. Elevation of Ground Level = \_\_\_\_\_ Feet Above/Below Mean Sea Level (Circle 'ABOVE' or 'BELOW' as applies)

19. Base of Lowermost Underground Source of Drinking Water (USDW) (10,000 PPM):	20. Proposed Well Depth:	21. Injection Zone Depth (Top/Base):
22. Injection Zone Name (Geologic Group, Formation, and/or Local Name):		

<b>23. WELL CONSTRUCTION INFORMATION:</b> All Depths Should Be Referenced To Ground Level							
Casing Size	Casing Weight	Hole Size	Casing Setting Depth		Sacks Cement	Cement Yield (Ft <sup>3</sup> /sack)	Cement Top
			Top	Bottom			

24. Tubing Size & Depth:	25. Packer Size & Depth:
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26. TYPE OF COMPLETION: <input type="checkbox"/> PERFORATED - Depths _____ <input type="checkbox"/> OPEN HOLE - Depths _____ <input type="checkbox"/> SCREEN - Depths _____
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27. Injection Fluid Density:	28. Reservoir Pressure @ Depth:	29. Expected Surface Injection Pressure:
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<b>30. CERTIFICATION</b>	<p><i>I certify that as the owner of the injection well, the Contractor or Agent shown in Item No. 6 of this Application is authorized to act on my behalf during the processing of this Application, to submit additional information as requested and to give oral statements in support of this Application. I agree to operate the well in accordance with Office of Conservation guidelines and to post and maintain the well identification sign showing the well Serial Number. After the well is completed, I will obtain a work permit from the Office of Conservation prior to repairing, stimulating or otherwise working on the well. Upon abandonment, the well will be properly plugged in accordance with Office of Conservation guidelines in effect at the time. Permission will be given for an authorized Office of Conservation agent to inspect the injection well and related appurtenances upon request.</i></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%; border-top: 1px solid black; text-align: center;">(Signature of well owner)</div> <div style="width: 35%; border-top: 1px solid black; text-align: center;">(Date)</div> </div>
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SUBMIT THE FOLLOWING AS AN ATTACHMENT TO THIS APPLICATION FORM:

31. Attachment I: Process Waste Injection Wells Only
- A. Analysis of injected fluid, (MSDS sheet is acceptable)
  - B. Certified statement indicating injected waste is a non-hazardous waste not regulated under the Resource Conservation and Recovery Act (RCRA).
32. Attachment II: Certified Location Plat of injection well location, Form MD-10-R, geologic map and cross section of USDW and Injection Zone.
33. Attachment III: Surface sketch to scale showing locations of:
- A. Water source well(s) or other source,
  - B. Injection Well,
  - C. General flow (piping) diagram from source to injection well; indicate all gauges, water taps, pressure relief and drain valves,
  - D. Pertinent buildings and/or other permanent landmarks,
  - E. All surrounding property lines; show names of adjacent property owners,
  - F. All water wells (including known abandoned wells) and other injection wells on the property and immediately adjacent property.
34. Attachment IV: Schematic of the injection well showing:
- A. Casing diameter, specifications, material (PVC, steel, etc.), and depth,
  - B. Screen type, length, material, slot or opening size,
  - C. Injection tubing size inside casing (if any),
  - D. Hole diameter (bit size),
  - E. Amount and type of cement used and depths to top and bottom of cement,
  - F. Wellhead showing all fittings,
  - G. Discharge line diameter and connection to wellhead,
  - H. Well house (if any).

**PERMIT APPLICATION FOR CLASS V INJECTION WELL: GUIDELINES AND REQUIREMENTS**

- 1) The injection well must be constructed according to guidelines established by the Louisiana Department of Transportation and Development ("DOTD") for a similar type water well by a licensed water well contractor.
- 2) Upon completion of the injection well, a permanent, weather-proof sign not less than 1 foot by 2 feet in size must be erected within ten feet of the well, which clearly states:

*"This Class V Injection well has been approved by the Louisiana Office of Conservation, Injection & Mining Division.*

Well Serial Number \_\_\_\_\_

*A work permit must first be obtained before repairing, stimulating, plugging, or otherwise working on the well. Call 225-342-5515 for a work permit number."*

If the wellhead is enclosed within a well house, the sign may be inside the well house, as long as it is prominently visible upon entering.

- 3) There is no fee for a well permit or work permit. Operation of an injection well without a permit is a violation of Statewide Order No. 29-N-1 (LAC 43:XVII, Subpart 1) and may subject the well owner to enforcement action and a fine as provided by La. R.S. 30. During these interim guidelines, no fines will be imposed on the owner of an existing unpermitted injection well provided that owner files an Application for a permit as soon as possible. However, repairing, stimulating, plugging or otherwise working on an injection well without a work permit will subject the owner to a fine.
- 4) **Non Waste Injection Wells Only:** Within 30 days after commencement of operation of the injection well, a sample of the injected water collected immediately prior to entering the injection well must be analyzed for chloride (Cl) and total dissolved solids (TDS). A copy of the analysis must be sent to the Injection & Mining Division which will become part of the well file. A reminder will be sent to the owner upon issuance of the permit.
- 5) **Process Waste Injection Wells Only:** An analysis of the injected waste fluid(s) must be submitted with the Application. A statement certifying the injected fluid(s) as being **non-hazardous** must accompany the analysis.
- 6) Upon abandonment, the well must be plugged in accordance with Office of Conservation guidelines in effect at the time of abandonment. During this 'Interim' period, plugging requirements will be those of the DOTD.

The staff of the Injection & Mining Division may be reached by phoning 225-342-5515. The completed Application Form with attachments should be submitted to:

Mailing Address

Office of Conservation  
Injection & Mining Division  
P. O. Box 94275  
Baton Rouge, LA 70804-9275

Parcel Delivery Address

Office of Conservation  
Injection & Mining Division  
State Land & Natural Resources Bldg.  
625 North 4th Street, Room 253  
Baton Rouge, LA 70802